

REMARKS

Reconsideration and withdrawal of the rejections of the application are respectfully requested in view of the amendments and remarks herein. The Examiner and her supervisor are thanked for the courtesies extended during the January 8, 2007 telephonic interview.

I. STATUS OF THE CLAIMS AND FORMAL MATTERS

Claims 40-47 are now pending. Claims 40, 41 and 42 have been amended, and new claims 43-47 have been added, without prejudice, without admission, without surrender of subject matter, and without any intention of creating any estoppel as to equivalents.

No new matter is added.

It is submitted that these claims are in full compliance with the requirements of 35 U.S.C. §112. The amendments to the claims and the remarks herein are not made for the purpose of patentability within the meaning of 35 U.S.C. §§ 101, 102, 103 or 112; but rather the amendments and remarks are made simply for clarification and to round out the scope of protection to which Applicants are entitled. Support for the amended recitation of claims 40-42 can be found on page 100 in the text describing the proliferation assay and table 6. Support for new claims 43-47 is found in the claims as previously filed and in the specification at, for example, page 71, line 19 to page 72, line 18.

II. THE OBJECTION TO THE CLAIMS IS OVERCOME

Claim 43 was objected to as being dependent upon a rejected base claim. Applicants respectfully submit that the amendments herein have overcome the rejections of claim 40, upon which claim 43 depends. Accordingly, it is respectfully believed that claim 43 is now allowable, and reconsideration and withdrawal of the objection to the claim is respectfully requested.

II. THE ART REJECTIONS ARE OVERCOME

Claims 40-42 were rejected under 35 U.S.C. §103(a) as allegedly being unpatentable over Burchardt et al. (WO 97/15298).

The Office Action states that "Burchardt et al. teaches the treatment of acute and chronic inflammatory disorders, such as psoriasis . . . using a glucocorticoid steroid, such as

carbenoxolone sodium . . . and an LTD4 receptor antagonist.” Office Action at 3. The Office Action further notes that “Burchardt et al. teaches the concomitant use of an LTD4 receptor antagonist with carbenoxolone sodium” but states that the use of “comprising” in the claims does not “patentably exclude the additional components, such as the LTD4 receptor antagonist of Burchardt et al.” Office Action at 3. Applicants respectfully disagree.

Initially, Applicants respectfully submit that the claims as previously presented were patentably distinct from Burchardt. The previously pending claims stated that the method comprised “administering, to a patient in need thereof, an inhibitor of the retinoic acid biosynthetic pathway, wherein said inhibitor is carbenoxolone.” Applicants respectfully submit that the claims, as previously pending, clearly indicated that the claimed method comprised the administration of only a single inhibitor of retinoic acid.

Indeed, this reading of the claims is clearly supported in the specification. For example, the Proliferation Assay discussed on pages 100 to 101 clearly indicates in Table 6 that carbenoxolone was administered in the presence of no other inhibitors (see line 6 of Table 6). Indeed, Figure 10 provides the results obtained from the Proliferation Assay, with the carbenoxolone providing the greatest reduction in proliferation.

For this reason, Applicants respectfully submit that the previous claims were in fact allowable over Burkhardt in view of the claims clearly indicating that only a single inhibitor of retinoic acid was administered, which is in direct contrast from Burkhardt which taught the use of the LTD4 receptor antagonist with optional use of glucocorticosteroids. Indeed, this view is especially relevant in light of the fact that Burkhardt only mentions carbenoxolone sodium on page 2 in a list of 68 different examples of “customary” glucocorticosteroids. Carbenoxolone sodium does not appear in the subsequent list of 37 “preferred” glucocorticosteroids also on page 2, nor does it appear in the group of “particularly preferred” glucocorticosteroids noted at the top of page 3. Furthermore, psoriasis is only mentioned on page 6 as one of a long list of “suitable indications” which not only lists specific diseases but also lists umbrella terms covering groups of diseases.

Nevertheless, in the interest of furthering prosecution, Applicants have herein amended the claims to replace the term “comprising” with “consists essentially of”. Applicants believe that such amendment makes clear the intention that only a single inhibitor is administered in the claimed methods.

In addition, new claims 44-47 have been added, which specify that administration is topical to the skin of the patient in need thereof. As Burkhardt does not teach or suggest topical administration of a single inhibitor comprising carbenoxolone, Applicants respectfully believe that these newly added claims are in condition for allowance.

Consequently, reconsideration and withdrawal of the rejection under 35 U.S.C. §103(a) is respectfully requested.

REQUEST FOR INTERVIEW

If any issue remains as an impediment to allowance, an interview with the Examiner is respectfully requested, prior to issuance of any paper other than a Notice of Allowance; and, the Examiner is respectfully requested to contact the undersigned to arrange a mutually convenient time and manner for such an interview.

CONCLUSION

For the reasons stated above, applicant respectfully requests a favorable reconsideration of the application, reconsideration and withdrawal of the rejections of and objections to the instant application, and prompt issuance of a Notice of Allowance.

Respectfully submitted,
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